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**FACSIMILE INFORMATION SHEET**Name of Individual: Examiner San-Ming HuiCompany: The United States Patent and Trademark OfficeCity and State: Alexandria, VAFacsimile Number: 1-571-273-8300From: Ann Marie CannoniTotal Number of Pages: 106 (including Information Sheet)Date Transmitted: December 4, 2007Application No. 10/056,680; Docket No. CV 01492K  
4686-045551

Message:

Dear Examiner Hui:

Attached herewith is a Supplemental Information Disclosure Statement, PTO/SB/08a Form, Transmittal Form and 9 references for the above-referenced patent application.

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PTO/SB/21 (09-04)

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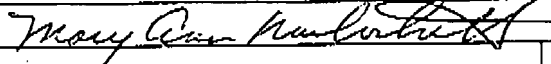
<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/056,680
	Filing Date	January 25, 2002
	First Named Inventor	Teddy Kosoglou et al.
	Art Unit	1617
	Examiner Name	San-ming R. Hui
Total Number of Pages in This Submission	Attorney Docket Number	CV01492K

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Declarations of Harry Davis, Jr., Ph.D. & Madhu Chintala, Ph.D. <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below): PTO/SB/08a Form 9 Articles
Remarks _____		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	The Webb Law Firm		
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Printed Name	Ann M. Cannoni		
Date	December 4, 2007	Reg. No.	35,972

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Typed or printed name	Mary Ann Mulvihill	Date	December 4, 2007

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